

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 73114

Title: Upper gastrointestinal bleeding from a Mallory-Weiss tear associated with transesophageal echocardiography during successful cardiopulmonary resuscitation: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06183516 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Syria

Author's Country/Territory: China

Manuscript submission date: 2021-11-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-10 07:53

Reviewer performed review: 2021-11-16 15:18

Review time: 6 Days and 7 Hours

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection



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Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

SI ECIFIC C	CIVILLIATS TO	AUTHORS				
Manuscript	NO: 73114 Thai	nk you all for	these profession	onal efforts (man	agement	of the
patient	situation	and	perfect	academic	wı	riting).
=======	========	=======	=======	=======	My	Only
Comment:	* The chief cor	nplaint was	very detailed,	therefore I sugg	est to m	ention
only the ma	ain symptom of	the patient	(eg. A 59-year-	old man suffere	ed from	upper
gastrointesti	nal bleeding	after succes	sful cardiopu	lmonary resus	citation	using
transesopha	geal echocardiog	raphy) Be	est regards			



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05098925 Position: Editorial Board Academic degree: MD

Professional title: Assistant Professor, Doctor, Lecturer, Staff Physician

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

Manuscript submission date: 2021-11-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-02 06:10

Reviewer performed review: 2021-12-06 14:43

Review time: 4 Days and 8 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection



Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Upper gastrointestinal bleeding from a Mallory-Weiss tear associated with transesophageal echocardiography during successful cardiopulmonary resuscitation: A case report Authors reported the rare case of Mallory-Weiss tear (MWT) after transesophageal echocardiograph (TEE). The authors prepared the manuscript well, but there are a few areas where additional information would enhance the manuscript. 1. Please provide the normal ranges of described laboratory (such as Hemoglobin). 2. Because the MWT (according to the figure 2) was located at EG junction and the postulated reasons of MWT development base on the position of TEE must be at or beyond the esophagogastric (EG junction) junction. To convince the reader, author should mention whether anesthesia fellow who proceed TEE performed transgastric view or any manipulation of TEE beyond the esophagogastric junction or not. 3. As authors described that "Endoscopy a week later revealed excellent mucosal healing. He achieved a satisfied recovery without any evidence of further upper gastrointestinal bleeding" in the "OUTCOME AND FOLLOW-UP" section. It would be more impressive if the author demonstrated the picture of endoscopic finding at the follow up period.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03666697 Position: Editorial Board Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2021-11-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-05 05:15

Reviewer performed review: 2021-12-12 10:23

Review time: 7 Days and 5 Hours

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection



Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors reported a case of Mallory-Weiss tear with bleeding after cardiopulmonary resuscitation, TEE, and percutaneous cardiopulmonary bypass resuscitation. The manuscript is well written. However, there are several comments to the authors. 1. In the chief complaints session, "the patient was transferred from the operating room to intensive care unit (ICU) in stable condition. But the patient suffered from a sudden onset of upper gastrointestinal bleeding." How long is the time between the patient's transfer to the ICU and the onset of gastrointestinal bleeding? 2. Since the patient had upper gastrointestinal bleeding, can the authors explain why the patient presented with hematochezia rather than hematemesis? Since the Mallory-Weiss tear was not active bleeding during UGI endoscopy, did the patient have bleeders other than Mallory-Weiss tear? Did the doctor who performed the TEE notice bloodstains on the TEE probe when withdrawing the instrument? 3. The quality of the endoscopic picture (Figure 2) is suboptimal. Can the author provide another high-quality image?



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05098925 Position: Editorial Board Academic degree: MD

Professional title: Assistant Professor, Doctor, Lecturer, Staff Physician

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

Manuscript submission date: 2021-11-09

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2022-01-05 12:05

Reviewer performed review: 2022-01-05 12:24

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection



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Peer-reviewer

Peer-Review: [] Anonymous [Y] Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Thank you for editing the manuscript and resubmitting. The changes have strengthened the work. Now, I project dicision as accept for publication. Hope this case report will contribute to the safety of TEE during CPR.